



FUTURE TESTING SERVICES

Reg. No: _____

Balochistan Project SCREENING TEST APPLICATION FORM

Project ID: FTS-003/19

Picture 1
Affix your recent
Passport size
Picture with
Gum

01. Bank Online Deposit of Rs. 550/- from designated bank branches.

Bank Code		Deposit Date	
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Note : Application Form will not be entertained without Original Deposit Slip (FTS copy)

Post Applied for: _____

02. Personal Information: Use CAPITAL letters and leave spaces between words.

01. Name in Full:

02. Father/ Husband Name :

03. Candidate CNIC # :

04. Gender : Male Female

05. Date of Birth : D D M M YEAR
Write your correct DOB
Otherwise you will be rejected

06. Postal Address : _____
Yes Yes City : _____ District : _____

07. Phone No: (OFF) : _____ (RES) : _____ Mobile No: _____

08. Marital Status : Single Married

09. Are you a Government Servant and applying through proper channel?
In case of Yes, please attach NOC Yes No

10. Are you a Disable Person?
If Yes, attach disability Certificate Yes No

11. Religion : Muslim Non-Muslim

03. Desired Test City:

Note: (Subject to a minimum of 200 candidates, otherwise the candidates will be assigned next nearest test city).

04. Academic Information: (Do not attach copies of your academic certificates at this stage)

Note: FTS will not issue Roll No. slip to those who have not filled in their academic record properly. Write exact degree name & major subject mention in Certificate / transcript.

Certificate / Degree level	Degree Title	Specialization / Major Subjects	Passing Year	Board / University / Institute
Matric / (10 Years)				
Intermediate / D.A.E (12/13 Years)				
Bachelor (14 Years)				
Master (16 Years)				
M. Phil / PHD/ Other				

05. Professional Qualification / Courses (Computer, Typing, Shorthand etc.)

Certificate/ Degree	Marks Obtained	Total Marks	Grade / Division	Board/ University/ Institute

06. Employment Record:

Sr. #	Organization / Employer Name	Job Title	Job Duration
01.			
02.			
03.			

07. Total Job relevant Post Qualification Experience as on closing date of application: Days Months Years

UNDERTAKING BY THE APPLICANT:

I _____ D/S/W _____ do hereby Solemnly declare and affirm that I have read and understood the instruction and Conditions for appearing in the FTS Test, and I have filled up the application form as per instructions given below. In case of any information contained herein is found at any stage to be missing, untrue, false, my candidature can be cancelled at any stage (EVEN AFTER EMPLOYMENT, IF SO REVEALED LATER), and I shall be liable to legal action.

Date : _____

Thumb Impression : _____

Candidate's Signature : _____

Picture 2
Affix your recent
Passport size
Picture with
Stapler

GENERAL INSTRUCTIONS / INFORMATION:

- ❖ Please fill the application form properly with complete and correct information / answers.
- ❖ Please do not leave any field blank, otherwise your application may not be considered.
- ❖ Incorrect or false information may result in cancellation of your candidature at any stage, even after employment, and proceeding of a legal action.
- ❖ Attach your two recent passport size photograph, copy of CNIC and Original Deposit Slip (FTS Copy).
- ❖ By hand, submission of application form is not allowed.
- ❖ Mobile phones or any electronic gadgets are not allowed in Test Centre premises.
- ❖ Application Fee (Service Charges) is non-refundable/non-transferable.
- ❖ Use separate envelope and separate application form for each post you are applying for.
- ❖ Application should reach FTS office latest by last date of submission of Application Form.
- ❖ FTS will not be responsible for late receiving of application through courier / Pakistan Post etc.

HELP LINE NUMBERS

Contact :051-4853126, 0333-0595948, 0333-1006357

Website : www.fts.org.pk

Email : queries@fts.org.pk

Please Send Application Forms to

Operation Manager

Project ID: FTS-002/19

M/s Future Testing Services (Pvt.) Ltd

Office No N-25, First Floor, Midway Center

6th Road Murree Road, Rawalpindi.

**Future Testing Services Pvt Ltd**

Bank Copy

**CHALLAN FORM**

(*Please deposit fee at any UBL Branch)

Date _____

UBL MCA No.	257011301
Branch Name & Code	
PV No. /CNIC No. / B Form:	
Dealer Code / Post Apply For:	
Applicant Name:	
Father Name:	
Amount	Amount in Words
550/-	Five Hundred Fifty Only (Nonrefundable / Nontransferable)

Depositor's Signature_____
Teller's Signature**Future Testing Services Pvt Ltd**

FTS Copy

**CHALLAN FORM**

Date _____

UBL MCA No.	257011301
Branch Name & Code	
PV No. /CNIC No. / B Form:	
Dealer Code / Post Apply For:	
Applicant Name:	
Father Name:	
Amount	Amount in Words
550/-	Five Hundred Fifty Only (Nonrefundable / Nontransferable)

Depositor's Signature_____
Teller's Signature**Future Testing Service**

Customer Copy

**CHALLAN FORM**

Date _____

UBL MCA No.	257011301
Branch Name & Code	
PV No. /CNIC No. / B Form:	
Dealer Code / Post Apply For:	
Applicant Name:	
Father Name:	
Amount	Amount in Words
550/-	Five Hundred Fifty Only (Nonrefundable / Nontransferable)

Depositor's Signature_____
Teller's Signature